

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: **PAGE 2 OF 10**  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**SNITKER FOR SENATE**

Full Name (Last, First, Middle Initial)

**A. Cherry, Dean B**

Mailing Address

**1072 W Magnolia Street**

City

**Clermont**

State

**FL**

Zip Code

**34711**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**N/A**

Occupation

**Retired**

Receipt For:

☐ Primary

☒ General

☐ Other (specify)

Election Cycle-to-Date

**3 0 0 0 0**

Date of Receipt

**1 0 / 1 2 / 2 0 1 0**

Amount of Each Receipt this Period

**3 0 0 0 0**

Full Name (Last, First, Middle Initial)

**B. Clifford, William M**

Mailing Address

**2786 Palo Verde Drive**

City

**Avon Park**

State

**FL**

Zip Code

**33825**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Air Force-Match**

Occupation

**USAF Retired**

Receipt For:

☐ Primary

☒ General

☐ Other (specify)

Election Cycle-to-Date

**2 2 0 0 0**

Date of Receipt

**1 0 / 0 1 / 2 0 1 0**

Amount of Each Receipt this Period

**1 0 0 0 0**

Full Name (Last, First, Middle Initial)

**C. Condon, James K**

Mailing Address

**7645 Wimpole Drive**

City

**New Port Richey**

State

**FL**

Zip Code

**34655**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

**Self**

Occupation

**Physician**

Receipt For:

☐ Primary

☒ General

☐ Other (specify)

Election Cycle-to-Date

**2 2 0 0 0**

Date of Receipt

**0 8 / 2 9 / 2 0 1 0**

Amount of Each Receipt this Period

**1 0 0 0 0**

**SUBTOTAL** of Receipts This Page (optional).....

**5 0 0 0 0**

**TOTAL** This Period (last page this line number only).....